

CLAIMS ONLY							Application Number <b>10644525</b>		Filing Date				
							Applicant(s)						
							* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT								
	Indep	Depend	Indep	Depend	Indep	Depend							
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Depend							Depend						
Total	4						Total						
Claims							Claims						

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